Return To: Andrew T. Harshild 3/09/10 3:23:38 Mr 5050 Poplar Av. Suite 1703 DK P BK 136 PG 469 MEMORIA TIN 38/57 DESOTO COUNTY, MS

DURABLE POWER OF ATTORNEY

W.E. DAVIS, CH CLERK

## KNOW ALL MEN BY THESE PRESENTS:

That I, ROBERT L. HARDIN, SR., of DeSoto County, Mississippi, have made, constituted and appointed, and by these presents do make, constitute and appoint, ROBERT L. HARDIN, JR. of Bradley County, Tennessee and KENNETH L. HARDIN of Mecklenburg County, North Carolina, my lawful Co-Attorneys-In-Fact, for me, and in my name, place and stead, to act in, manage and conduct all of my affairs and estate and to do all things necessary to the accomplishment of said purpose, including but not limited to the authority and powers hereinafter granted.

To sign my name by ROBERT L. HARDIN, JR and KENNETH L. HARDIN as maker, or endorser, to any and all checks, drafts, promissory notes, certificates of stock and other instruments of a financial character, to endorse all negotiable papers in my name, to draw checks upon any and all accounts which I may have in any bank, savings and loan association or other type of financial institution to deposit to and withdraw from any and all such accounts, and to enter any safe deposit box, which I may have in any bank or other institution.

To ask, demand, sue for, collect, recover and receive all sums of money, debts, rents, accounts, claims, legacies, bequests, interest, dividends, annuities, insurance and demands whatsoever which are now, or may hereafter become due, owing, payable, or belonging to me, and to use all lawful ways and means for the collection and recovery thereof.

To enter into, make, sign, execute, acknowledge, deliver and perform any contract, agreement, or undertaking which may, in the opinion of my said attorney, be necessary or proper for my welfare and best interests and that of my property and estate or any part thereof.

Subject to the agreement of both of my Co-Attorneys-In-Fact, that my real estate may be sold and subject to limitations hereafter set forth, to sell all real property owned by me and to execute in my name, all instruments, including but not limited to deeds and conveyances, necessary and incident thereto. In the event my Co-Attorneys-In-Fact have determined, after consulting with my treating physician, who has determined in writing that I would be unable to return to my home, I

authorize my Co-Attorneys-In-Fact to sell my real estate and execute all documents necessary to effectuate the transfer of said real estate.

Should the real property be sold, I direct that it be sold at the fair appraised value. I further direct that prior to selling the real property, my co-attorneys-in-fact take in consideration of the assets that I own.

To prosecute, settle or sue upon any and all claims, demands and rights of action whatsoever, which I now have, or hereafter may have, against any person or organization, and to execute, in my name, all releases or other instruments necessary and incident thereto.

To execute and perform all other acts, deeds and things whatsoever which, in the opinion of my said attorney, ought to be done, executed or performed for my welfare and best interests and that of my property and estate.

The power herein granted to my said Co-Attorneys-In-Fact, to draw checks or drafts upon any and all accounts which I may have in any bank, savings and loan association, or other type of financial institution, shall continue until such time as said institution receives in writing, ample notice that the herein power of attorney has been terminated, by operation of law or otherwise. I expressly agree, for myself and my legal representatives, to indemnify and hold harmless the said institution for the payment of any funds withdrawn by my said attorney-in-fact after termination of this power, but before actual notice thereof is received by said institutions in the manner set forth above.

The powers herein granted to my said Co-Attorneys-In-Fact shall remain in full force and effect although I may become mentally or physically debilitated and such mental or physical debility shall not revoke the powers herein granted.

The herein power of attorney shall not be affected by my subsequent disability or incapacity, as herein provided, and moreover, my said attorney is specifically vested with the powers and authority permitted by law under and pursuant to Chapter 299 of the 1983 Public Acts of the State of Tennessee and any amendments thereto.

Should either of my said named co-attorneys-in-fact, die or for any reason be unable or

unwilling to serve as such, then and in that event, I hereby constitute and appoint, my son, TIMOTHY B. HARDIN, of DeSoto County, Mississippi, as my true and lawful alternate co-attorney-in fact, for me in my name, place, and stead to act in, manage and conduct jointly with the remaining co-attorney- in-fact all of my affairs and estate and to do all things necessary to the accomplishment of said purpose, including all of the powers herein granted to the above named ROBERT L. HARDIN, JR. AND KENNETH L. HARDIN.

No banking institution, purchaser or any other party having any dealings and/or business transactions with my said co-attorney-in-fact, ROBERT L. HARDIN, JR., KENNETH L. HARDIN, or TIMOTHY B. HARDIN, in relation to or in connection with my affairs, shall be under any duty or obligation to inquire as to their right to exercise the powers which I have granted and conferred upon them by virtue of this Power of Attorney, nor shall any party, as aforesaid, be obligated or have any duty to see to the proper application of any funds or any other assets that I may own that may be paid over to the aforesaid co-attorneys-in-fact.

I hereby ratify and confirm all things so done by my said co-attorneys-in-fact, as herein provided, as fully and to the same extent as if by me personally done and performed.

Whenever pronouns occur herein, they shall be construed to their proper gender and number according to the context of this instrument.

I hereby nominate my said Co-Attorneys-In-Fact as my conservator, guardian of my estate and/or person, should a Court of competent jurisdiction determine that the appointment of such fiduciary is required for the protection of my estate and/or person.

I hereby reserve the full right and power of substitution and revocation.

IN WITNESS WHEREOF, I have hereunto set my hand, this 25 day of feb, 2006.

ROBERT L. HARDIN, SR.

## STATE OF TENNESSEE COUNTY OF SHELBY

Before me, a Notary Public, in and for said State and County, duly commissioned and qualified, personally appeared Robert L. Hardin, Sr. to me known to be the person described in and who executed the foregoing instrument, and acknowledged that he executed the same as his free act and deed.

WITNESS my hand and notarial seal at office, this 28th day of \_\_\_\_\_\_\_, 2006.

NOTARY PUBLIC

My commission expires:

12-9-09

Prepared by: Michael T. Hartsfield 5050 Paplar Avenue, Suite 1703 Memphis, TN 38157 (901) 683-2525